

WEEKLY ACTIVITY REPORT

PERIOD: _____ - _____

GENERAL INFORMATION

1. DESIGNATED OPERATOR: _____

6. RIG NAME: _____

2. CONTACT/PHONE NO.: _____

7. API: (10 digits) _____

3. LEASE (BHL): _____

8. WATER DEPTH: _____

4. WELL NO.: _____

9. RKB: _____

5. AREA/BLOCK (BHL): _____

10. CURRENT WELLBORE INFORMATION AT CLOSE OF REPORTING PERIOD

WELLBORE	MD	TVD	MW-PPG	LAST BOP TEST DATE	LAST BOP TEST PRESSURE LOW/HIGH

11. WELLBORE INFORMATION

WELLBORE	SPUD DATE OF BOREHOLE	TD DATE OF BOREHOLE	STATUS (<i>Choose: DRL, WO, PA, TA, or COM</i>)	SUS., COMP., or ABN.DATE	TOTAL DEPTH MD	TOTAL DEPTH TVD
00						
01						
02						
03						
04						

12. DAILY SUMMARY OF OPERATIONS WITHIN THE REPORTING PERIOD:

WEEKLY ACTIVITY REPORT (continued)

PERIOD: _____ - _____

13. CASING/LINER SUMMARY:

CASING DETAILS	DEPTH (MD/TVD)	TEST PRESSURE (psi)	SHOE TEST (EMW)	TOP OF LINER DEPTH (MD)	CEMENT VOL. (cu. ft.)

14. LIST ALL OPEN HOLE LOGS AND SURVEYS RUN (including MWD, velocity surveys, and directional surveys)

DATE	LOG/SURVEY	INTERVAL (MD)	RUN No.

INDICATE BELOW IF ANY OF THE FOLLOWING SAMPLES/SURVEYS WERE TAKEN:

15. VELOCITY SURVEYS: **YES** ____ **NO** ____

18. PALEO SAMPLES: **YES** ____ **NO** ____

16. CONVENTIONAL CORES: **YES** ____ **NO** ____

19. LITHO SAMPLES: **YES** ____ **NO** ____

17. SIDEWALL SAMPLES: **YES** ____ **NO** ____

20. GEOCHEM SAMPLES: **YES** ____ **NO** ____

PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that we collect this information to obtain well status, well and casing test, and well casing configuration data. MMS uses this information to have accurate data and information on the wells under their jurisdiction and to ensure compliance with approved plans. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.118. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 1/2 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, NW, Washington, DC 20240.